

The incidence of persistent pain after Caesarean section and its association with maternal anxiety and socioeconomic background

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Following ethical permission 201 parturients were recruited before Elective Caesarean section, and baseline data recorded. At 4 months a Brief Pain Inventory (BPI) and an Edinburgh Post Natal Depression Score (EPND) was sent by post. In the event of a non-return this was repeated once. The primary end point was to determine the incidence of persisting pain (from any cause).

Eleven patients were excluded as the contact details given could not be verified. Of the remaining 190, 98 correctly completed and returned the follow up forms, giving a response rate of 51.5%. A total of 41 patients reported persistent pain using the BPI system, meaning an incidence of 41.8%.

Six of those patients had reported pain pre-operatively. Excluding them, the incidence of new persistent pain was 35 of 98 (35.7%).

One variable associated with persistent pain, was post-natal depression. Using the Edinburgh Post Natal Depression Score, those with no pain had a mean score (SD) of 3.04(4.29), those with pain 7.38(5.6), $p < 0.01$ (Student's T-test).

So in our prospectively recruited population, the overall incidence of pain after Caesarean section at 4 months was 41.8%, and this had an association with post-natal depression. Further work is required to find a clinically useful predictor for persistent pain, but it is possible that identifying those at risk of post natal depression, may be a useful way to also capture those at risk of persisting pain.

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